COMBINED DECLARATION FOR	PATENT APPLICATION	AND POWER OF	AT TORNEY
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(Includes Reference to PCT International Applications)

Attorney's Docket Number: 5709.200-U.S.

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

α -amylase variants
The specification of which (check only one item below): [] is attached hereto [X] was filed as United States application
Application No. To Be Assigned
on November 16, 1999 and was amended on
[] was filed as PCT international application Number
and was amended under PCT Article 19 on
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign application(s) for patent or inventor's certificate or of any PCT international applications(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other htan the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL/FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	,	DATE OF FILING	PRIORIT	TY CLAIMED
(if PCT, indicated "PCT")	APPLICATION NUMBER	(day, month, year)	UNDER	R 35 USC 119
			[]YES	[] NO
			[]YES	[]NO
			[]YES	[] NO
			[]YES	[] NO
			[]YES	[] NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

Attorney's Docket Number:

(Includes Reference to PCT International Applications)

5709.200-U.S.

I hereby claim the benefit under Title 35, United States Code '120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this applications is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, '112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, '1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

				UNDER 35 U.S.C. 120:				
		U.S.	APPLICATIONS			STATUS (Che	eck one)	
U.S. APPLICATION NUMBER U.S. FILING DATE			Patent	ted Pend	dina Aban	ndoned		
09/193,00		TION NUMBER	November 16,		Patent	X Year	uing Aban	Idoned
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		PCT APPLICATION	NS DESIGNATING T	HE U.S.				
APPLICATION NO. FILI		LING DATE	US SERIAL NUMBERS ASSIGNED (if any)					
7.71								
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Trådema 33,728	Reg. No. 35,127	d therewith. Steve T. Zelson Reg. No. 36,993 Reg. No Steve T. Zelson, Esq. Novo Nordisk of North Am	Elias J. Lambiris Vi 41,324 Reg. No. 38 erica, Inc.	g attorney(s) and/or agent(s) to prosecute this a aleta A. Gregg Carol E. Rozek Robert L. 3,475	Stames Rez	a Green, Reg. No. Direct Telephone C Steve T. Zelson	30,335 Reg. No.	
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(Includes Reference to PCT International Applications) Full Name Family Name First Given Name First G			First Given Name	5709.200-U.S. Second Given Name		
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	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship		
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	Full Name of Inventor	Family Name	First Given Name	Second Given Name		
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship		
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	Full Name of Inventor	Family Name	First Given Name	Second Given Name		
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	Full Name of Inventor	Family Name	First Given Name	Second Given Name		
III III	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship		
	Post Office Address	Post Office Address	City	State & Zip Code/Country		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
Date	Date	Date
Signature of Inventor 4	Signature of Inventor 5	Signature of Inventor 6
Date	Date	Date
Signature of Inventor 7	Signature of Inventor 8	Signature of Inventor 9
Date	Date	Date